peasants as varying between poor and fair, according to Magyar standards, from region to region, and poor compared to an American farmer's standards. However, the Magyar peasants are still better nourished than their fellow countrymen living in the cities, exclusive of the aristocrats of the Communist bureaucracy. A definite lack in their diet, however, is that of milk (even in the case of children), green vegetables and fruits. This is due partly to financial reasons, partly to dietary habits. 146 [369]

Public health regulation. Hungary was one of the first states in Europe to provide its people with modern public health legislation. Law No. 16 of 1876 entrusted the local administration in the megye with the job of decreasing the death rate and the regulation of hygienic conditions. This same law provided for reclaiming of swamp lands, regulated hygienic conditions and first aid provisions in the work shops, established ambulance centers, and set the standards for midwives. Rural hygiene was greatly improved in 1927 when the Royal Hungarian National Institute for Public Health was founded, chiefly from a grant of the Rockefeller Foundation. 744

In the pre-war years, two organizations, both under government

744 control, were responsible for the improvement of public health conditions in Hungary. The first and the older one was the Stefánia Association, founded in 1915, which specialized in infants' and mothers' care. In 1939 this organization operated 327 dispensaries, 150 milk kitchens, 14 mothers' homes, 29 créches, 25 maternity clinics and 4 children's hospitals dispersed throughout the entire country, and contributed much to the reduction of infant mortality between the two world wars.

The other nationwide health organization was the Zöldkereszt 'Green Cross' which specialized in improving village hygiene. In 1933, when this service was established by the government, its aim was to organize rural medical care in such a manner as to have a well equipped health center with a doctor and a nurse for every village of 8,000 inhabitants. Green Cross nurses educated in State nursing schools received thorough instruction in nursing and general welfare work. They concentrated their efforts on eliminating tuberculosis and venereal disease. World War II prevented the establishment of the health-center network all over the country, and the Green Cross has now been taken over by the Communist government, which also is working for rural health centers. Although figures are scarce, it can be

744 assumed that by now about one-fourth of the rural population has access to such health centers.

[645] Contemporary health regulation in Hungary is centralized within and directed by the Ministry of Health established in 1951. This agency reports in 1955 that during its four years it has increased the network of local health agencies by over 50 per cent; this is certainly an exaggeration. The evaluation of health data furnished by the Communist government is becomming increasingly difficult, since only percentages and indices have been published and never actual statistics.

165 In 1930 the percentage of infant mortality was 15.8 and, in 1938, 13.1 per cent. The death rate was as follows in the pre-war periods

Year	Deaths per mille
1925	19.9
1938	14.4
1941	14.1

In 1951 a mortality rate of 8.4 per cent was claimed. This is still
161 higher than the Western European average. Communist estimates also gave a natural population increase of 7.8 per 1000 in 1951 as compared to 5.7 in 1938. These figures seem to be acceptable.

pared to 5.7 in 1938. These figures seem to be acceptable. 000

Hospitals, dispensaries, and medical treatment. The most 164 744
common diseases causing death are, in order of importance: heart troubles, tuberculosis and cancer. Owing to the considerable activity of both the pre- and post-war governments, contagious and epidemic diseases today kill an ever-decreasing number of Hungarians. Vaccination against smallpox and diphtheria is compulsory in Hungary; and the local health authorities are empowered to decree compulsory preventive shots against typhoid whenever this disease occurs locally. Energetic preventive measures are largely responsible for the very limited number of typhoid cases in the country (6,376 in 1938) in spite of rather poor hygienic conditions and unsafe drinking water.

The figures on venereal diseases do not deviate much from the European average, the national mean being 7.1 per thousand. VD is even more rare among the peasants, among whom the mean is 2.8 per thousand. VD is most common in Békés county (5.8 per thousand) and lowest in Győr county (0.7 per thousand). There are VD dispensaries in every county-seat where free treatment is being offered to anyone.

Tuberculosis is being fought with the same vigor. Dispensaries

744 around the country offer free diagnosis and treatment to those not
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[734] otherwise protected. Numerous sanatoria, some of them especially for children, function in different parts of the country. In 1949 there were 176 TB dispensaries in Hungary. Ambulant anti-TB units equipped with X-rays and laboratory facilities perform spot checks in dangerous areas. According to the government, TB mortality sank from 14.2 per 10,000 in 1938 to 8.9 per 10,000 in 1951.

444 In Hungary there is one pharmacy per every 6,000 inhabitants, but the pharmacies are heavily concentrated in the cities, so that in rural areas only towns with more than 10,000 inhabitants usually
278 have pharmacies. All reports from Hungary agree that since the end of World War II there has been a continuous shortage of medicine, the extent of which, however, is very difficult to establish.

743 The hospital situation in Hungary today is much worse than in the United States. A comparison of 1954 Hungarian figures with 1953 figures from the United States, where the hospital situation is still not adequate, shows that while in the U.S. there is one hospital bed for every 96 persons, the Hungarian figure is one bed for every 150 persons.

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furnish safe drinking water, but the financial situation of most of the communities prohibits such works.

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Before the war, 73 per cent of the large number of sampled wells furnished water which did not conform to sanitary standards. At the same time, a government survey established that 8,200 wells would have to be sunk and 250 piped systems constructed if there was to be at least one entirely safe drinking well per thousand inhabitants, and if every inhabitant was to live within 500 meters of such a well. The war prevented any considerable improvement in this regard, and even according to Communist figures, not more than 2,000 safe wells have been drilled since the war.

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746 871 241 that 250,000 children will benefit by this project, and families with 800,000 children will be made financially stronger.

Beside all its other activities the Bureau subsidizes other social welfare bureaux, child protection organizations and crêches, and gives free lectures for the public.

Green Cross Health Centres.

•744 It was found necessary for a centrally organized institution to supplement the public health services of existing local organizations and make them available in communities which do not possess them as a result of difficult communications, great distances from other settlements, extremes of climate etc.

Recently the organization of public health services in the villages has been greatly expanded. In 1940 the Ministry of the Interior established the Green Cross Health Service, the main object of which is to render health services in remote districts of the country. At the same time the public health centres in the counties were provided with dispensaries. These are staffed with Green Cross nurses who combat diseases in the villages by educational and practical measures. The work of the public health centre includes free advice on marriage and vocational problems as well as instruction in hygiene, pre-natal and infant care, looking after school-children, giving advice to those suffering from tuberculosis and venereal diseases, combating epidemics etc. Their manifold activities extend to the supervision of pure drinking water and housing conditions, and to advice on a properly balanced diet. About 100 public health centres (dispensaries) are built each year and their work is carried out in almost

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800 districts by 2100 separate organizations assisted by 1200 Green Cross Nurses. 944.

The following organizations also help in the work of raising public health standards in rural districts: the National Child Welfare Bureau, Children's Hospital Society, five colleges for Green Cross nurses, four medical institutions for combating malaria, a research institution in influenza and other epidemics, and lastly the institute for maintaining an adequate supply of pure drinking water. The latter examines more than 30,000 wells each year, and has arranged for 1700 new wells to be sunk. Up to date 200 public health centres are housed in their own buildings.

IV. PROMOTION OF INTERESTS OF LABOUR.

Historical background.

The legal system devised for the protection of labour had to be reconstructed in the years following the 1918 collapse. 466

The movement to protect the wage-earners from exploitation arises from laws enacted during the early 'forties of the last century when the industrialization of the country was started on a large scale. The restriction of child labour is the oldest example of protective legislation. The corresponding act of 1840 (Act XVII) was not only the forerunner of similar legislation in several other European countries but it was wider in scope. 464

A statute passed in 1848 limited the working day to nine hours for minors. The labour act of 1878 prohibited the employment of children under twelve years of age and made provision for the protection of apprentices and women. 466 464 4*